

State of Utah DEPARTMENT OF COMMERCE Division of Corporations & Commercial Code

PO Box 146705

Salt Lake City UT 84114-6705

Phone: (801) 530-4849

or toll free in-state (877) 526-3994

Fax: (801) 530-6438

Articles of Incorporation (Professional)

Important: Read instructions before completing form							•		
1.	Name of Corporation:								
2.	Purpose:								
3.	Shares:	Type 1:		Amount:		4. Profession:			
_	<u> </u>	Type 2:		Amount:	<u> </u>				
5.	Registered Agent Name, Signature and Street Address: (must be a Utah address where process may be served)	Name Street Address I hereby accept appointment as Registered Agent for the above named corporation. Authorized Signature of R.A. or On behalf of R.A. Company Date							
6.	Name, Signature and Address of Incorporator (attach additional page if there is more than 1 incorporator)	Name Address Signatur				City	Date	State	Zip
		1.	-						
_	Name and Residence	Name						Position	
,. 	Address of Officers: (attach an additional page if there are more	Address				City		State	Zip
	than 2 officers)	Name						Position	
		Address				City		State	Zip
8.	Name and Residence	1Name						Position	
	Address of Directors:	Address				City		State	Zip
	(attach an additional page if there are more than 2 directors)	2 Name						Position	
		Address				City		State	Zip
		1							
9.	Name and Residence	Name						Position	
	Address of Shareholders: (attach an additional page if there are more than 2 shareholders)	Address				City		State	Zip
		2 Name						Position	
		Address				City		State	Zip
10	. Principal Address:								
	(Optional)	Address				City		State	Zip